

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1						
2	1						
3	1						
4	1						
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48							
49							
50							
TOTAL IND.	8		↓		↓		↓
TOTAL DEP.	24	↔		↔		↔	
TOTAL CLAIMS	37						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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